## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (87)-273-2888

					•			
INSTRUCTIONS: This is appropriate. All further c indicated unless corrected maintenance fee notificati	d below or directed off	or tran ig the l erwise	smitting the ISSI Patent, advance of in Block 1, by (a	JE FEE and PUBLICAT rders and notification of a) specifying a new corre	ION FEE (if requi maintenance fees w spondence address;	ired). Blocks vill be mailed and/or (b) in	I through 5 si to the current adicating a sepr	hould be completed when correspondence address a trate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanyin, papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
53080	7590 02/05	/2010		na,				
MCDERMOTT WILL & EMERY LLP 600 13TH STREET, NW WASHINGTON, DC 20005-3096					I hereby certify that this Feels; Transmittal is being deposited with the Unite- States Postal Service with sufficient postage for first class mall in an envelop addressed to the Mail Stop ISSUE FEE address above, or being factional transmitted to the USPTO (571) 273-2885, on the date indicated below.			
*					(Depositor's name)			
Customer No.: 53080					(Signature)			
				L.				(Date
APPLICATION NO. FILING DATE			FIRST NAMED INVE			ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/557,746 11/21/2005				Satoshi Shibata 071971-0432 2300				2300
TITLE OF INVENTION:	MANUFACTURING I	METHO	OD OF A SEMIC	ONDUCTOR DEVICE				
APPLN, TYPE	SMALL ENTITY	Tot	SUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	DEED TOO	AL FEE(S) DUE	DATE DUE
	NO NO	15.	\$1510	\$300	\$0	SPEE 101	\$1810	05/05/2010
nonprovisional				CLASS-SUBCLASS	30		31610	05/05/2010
EXAMINER CRAWFORD, LATANYA N			ART UNIT 2813	438-197000	J			
							MADEDI	MOTTIMULA
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> </ol>				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR alternative.				
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively, EVIERY LLP  (2) the name of a single firm (having as a member a 2					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
PANASONIC CORPORATION Osaka, Japan								
Please check the appropria	te assignee category or	catego	ries (will not be pr	inted on the patent):	Individual 🖺 Co	rporation or o	other private gro	up entity 🚨 Governmen
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
☐ Issue Fee ☐ A check is enclosed. ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.								
Advance Order - # of Copies Four (4)				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50041/ (enclose an extra copy of this form).				
5. Change in Entity State				b. Applicant is no lor				
NOTE: The Issue Fee and interest as shown by the re								
interest as shown by the re	cords of the United Sym	ies Pau	/ ragemark	Office.				
Authorized Signature _		-/			Duit	oril 28, 2		
Typed or printed name	Michael E.	-			Registration N	<sub>o.</sub> 36,1	39	
This collection of informa an application. Confidenti submitting the completed this form and/or suggestio Box 1450, Alexandria, Vir Alexandria, Virginia 2231:	tion is required by 37 G ality is governed by 36 application form to the ns for reducing this bur- reginia 22313-1450. DC 3-1450.	FR 1.3 U.S.C. USPT den, sh NOT	11. The information 122 and 37 CFR O. Time will vary could be sent to the SEND FEES OR (	on is required to obtain or 1.14. This collection is es depending upon the indi- e Chief Information Offic COMPLETED FORMS T	retain a benefit by the timated to take 12 novidual case. Any con- er, U.S. Patent and 'O' THIS ADDRESS	ne public which ninutes to cor mments on the Trademark Of SEND TO:	ch is to file (and nplete, includin e amount of tin ffice, U.S. Depa Commissioner f	by the USPTO to process g gathering, preparing, and ne you require to complete artment of Commerce, P.O. or Patents, P.O. Box 1450

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.